



Sales@TrinityCL.com

Phone: 631-347-2601

Email: _____

PRE-QUALIFICATION FORM

Amount Required:		Use of Funds:		Current Advance/Loan Balance & With Whom:	
Business Legal Name:			Business DBA Name:		
Annual Business Revenue:	<input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Partnership			State of Incorporation:	Fed Tax ID #:
Physical Street Address:		City:	State:		Zip:
Billing Street Address (If different than above):		City:	State:		Zip:
Physical Local Phone #:		Billing Location Phone #:		Preferred Contact Phone #:	
Industry Type (SIC Code or Description):		<input type="checkbox"/> Rented <input type="checkbox"/> Mortgaged Amount: \$ _____		Business Start Date:	
Owner/Officer:		Ownership %:		Title:	
Legal Last Name:	Legal First Name:	Date of Birth:	SSN:	Cell #:	
Home Address:		City:	State:		Zip:
Owner/Officer:		Ownership %:		Title:	
Legal Last Name:	Legal First Name:	Date of Birth:	SSN:	Cell #:	
Home Address:		City:	State:		Zip:

By signing below, the Merchant and Owner(s)/Officer(s) identified above (individually, an "Applicant") each represents, acknowledges, and agrees that (1) all information and documents provided to Trinity Capital Lending, LLC. ("TCL") are true, accurate, and complete, (2) Applicant will immediately notify TCL of any change in such information or financial condition, (3) Applicant authorizes TCL to disclose all information and documents that TCL may obtain including credit reports to its representatives and other persons or entities (collectively, "Assignees") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transactions, including without limitation the application therefore (collectively, "Transactions"), and each Assignee is authorized to use such information and documents, and share such information and documents with other Assignees, in connection with potential Transactions, (4) Applicant waives and releases any claims against TCL and any information-providers arising from any act or omission relating to the requesting, receiving or release of information, and (5) each Owner/Officer represents that he or she is authorized to sign this form on behalf of Merchant.

Owner(s)/Officer(s)

Sign: _____ **Print:** _____ **Date:** _____

Sign: _____ **Print:** _____ **Date:** _____